

**Registration Form – please type or print clearly**

✂ ----- Cut here and mail portion below with check **payable to UC Regents** ----- ✂

**2004 CALIFORNIA NEMATOLOGY WORKSHOP**

**Tuesday, March 30, 2004**

Kearney Agricultural Center, 9240 S. Riverbend Avenue, Parlier, CA 93648

\_\_\_\_\_  
Name (Last, First, Middle Initial)

\_\_\_\_\_  
Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

(       )  
\_\_\_\_\_  
Daytime phone

**Mail (by March 17) to:**

Lois Strole

UC Kearney Agricultural Center

9240 S. Riverbend Avenue

Parlier, CA 93648

**Cost: \$30/person** (includes lunch) – **Registration Deadline March 17**  
**Make check payable to: Regents of the University of California**